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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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10/712,758

11/12/2003

Andrew Levy

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EXAMINER

WANG, CLAIRE X

ART UNIT

PAPER NUMBER

2624

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DELIVERY MODE

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PAPER

Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

Office Action Summary	Application No. 10/712,758	Applicant(s) LEVY ET AL.	
	Examiner Claire Wang	Art Unit 2624	

-- The MAILING DATE of this communication appears on the cover sheet with the correspondence address --

Period for Reply

A SHORTENED STATUTORY PERIOD FOR REPLY IS SET TO EXPIRE 3 MONTH(S) OR THIRTY (30) DAYS, WHICHEVER IS LONGER, FROM THE MAILING DATE OF THIS COMMUNICATION.

- Extensions of time may be available under the provisions of 37 CFR 1.136(a). In no event, however, may a reply be timely filed after SIX (6) MONTHS from the mailing date of this communication.
- If NO period for reply is specified above, the maximum statutory period will apply and will expire SIX (6) MONTHS from the mailing date of this communication.
- Failure to reply within the set or extended period for reply will, by statute, cause the application to become ABANDONED (35 U.S.C. § 133). Any reply received by the Office later than three months after the mailing date of this communication, even if timely filed, may reduce any earned patent term adjustment. See 37 CFR 1.704(b).

Status

- 1) ☒ Responsive to communication(s) filed on 12 November 2003.
- 2a) ☐ This action is **FINAL**. 2b) ☒ This action is non-final.
- 3) ☐ Since this application is in condition for allowance except for formal matters, prosecution as to the merits is closed in accordance with the practice under *Ex parte Quayle*, 1935 C.D. 11, 453 O.G. 213.

Disposition of Claims

- 4) ☒ Claim(s) 1-27 is/are pending in the application.
- 4a) Of the above claim(s) _____ is/are withdrawn from consideration.
- 5) ☐ Claim(s) _____ is/are allowed.
- 6) ☒ Claim(s) 1-27 is/are rejected.
- 7) ☐ Claim(s) _____ is/are objected to.
- 8) ☐ Claim(s) _____ are subject to restriction and/or election requirement.

Application Papers

- 9) ☐ The specification is objected to by the Examiner.
- 10) ☒ The drawing(s) filed on 12 November 2003 is/are: a) ☒ accepted or b) ☐ objected to by the Examiner.
Applicant may not request that any objection to the drawing(s) be held in abeyance. See 37 CFR 1.85(a).
Replacement drawing sheet(s) including the correction is required if the drawing(s) is objected to. See 37 CFR 1.121(d).
- 11) ☐ The oath or declaration is objected to by the Examiner. Note the attached Office Action or form PTO-152.

Priority under 35 U.S.C. § 119

- 12) ☐ Acknowledgment is made of a claim for foreign priority under 35 U.S.C. § 119(a)-(d) or (f).
- a) ☐ All b) ☐ Some * c) ☐ None of:
1. ☐ Certified copies of the priority documents have been received.
 2. ☐ Certified copies of the priority documents have been received in Application No. _____.
 3. ☐ Copies of the certified copies of the priority documents have been received in this National Stage application from the International Bureau (PCT Rule 17.2(a)).

* See the attached detailed Office action for a list of the certified copies not received.

Attachment(s)

- | | |
|--|---|
| 1) <input checked="" type="checkbox"/> Notice of References Cited (PTO-892) | 4) <input type="checkbox"/> Interview Summary (PTO-413) |
| 2) <input type="checkbox"/> Notice of Draftsperson's Patent Drawing Review (PTO-948) | Paper No(s)/Mail Date. _____ |
| 3) <input checked="" type="checkbox"/> Information Disclosure Statement(s) (PTO/SB/08) | 5) <input type="checkbox"/> Notice of Informal Patent Application |
| Paper No(s)/Mail Date _____ | 6) <input type="checkbox"/> Other: _____ |

DETAILED ACTION

Claim Rejections - 35 USC § 102

1. The following is a quotation of the appropriate paragraphs of 35 U.S.C. 102 that form the basis for the rejections under this section made in this Office action:

A person shall be entitled to a patent unless –

(b) the invention was patented or described in a printed publication in this or a foreign country or in public use or on sale in this country, more than one year prior to the date of application for patent in the United States.

2. Claims 1-8, 18, 20-21, 23-25 and 27 are rejected under 35 U.S.C. 102(b) as being anticipated by Maschke et al. (US 6,221,012 hereinafter "Maschke").

As to claim 1, Maschke teaches a system for monitoring and processing signal parameters acquired from a patient in multiple operational modes and housed as a portable monitoring unit (patient monitoring systems for collecting, storing and displaying the medical data; Col. 1, line lines 13-14), comprising a data acquisition processor for receiving and processing patient parameter data from a plurality of different patient attached sensors to provide processed patient parameter data (patient data are collected from a medical patient using the plurality of sensors; Col. 2, lines 45-46); an image reproduction device for displaying processed patient parameter data (displaying patient data on a display device; Col. 2, lines 42-43); a communication interface for communicating said processed patient parameter data to: said image reproduction device for display in a first mode (the portable monitor displays the

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physiological data; Col. 4, line 4); a docking station when said portable monitoring unit is docked in said docking station in a second mode (docking station is where the portable monitor may be attached; Col. 14, lines 37-38); and a network access point coupled to a communication network via wireless communication in a third mode (communicating the acquired data signals to monitor using a wireless communication link; Col. 3, lines 41-43); and a power unit for re-charging a battery in said portable monitoring unit in said second mode (Battery; 166 Fig. 1A).

As to claim 21, it differs from claim 1 in that claim 21 does not teach of the image reproduction device for displaying processed patient parameter or the image reproduction device for display as taught by claim 1. Please see claim 1 for detail analysis.

As to claim 24, it differs from claim 1 in that claim 24 further teaches removing from docking station without disconnection of a connector, which is taught by claim 5. Please see claims 1 and 5 for detail analysis.

As to claim 25, it is the combination of claims 1 and 8. Please see claims 1 and 8 for detail analysis.

As to claim 27, it is the method claim of claim 1. Please see above for detail analysis.

As to claim 2, it differs from the communication interface of claim 1 in that claim 2 further teaches wherein said communication interface communicates said processed patient parameter data to without requiring physical removal of said plurality of patient attached sensors (as a result of the monitor-pod configuration no connections need to be detached; Col. Lines 51-54).

As to claim 3, it differs from claim 2, in that claim 3 further teaches wherein said plurality of patient attached sensors are connected to said data acquisition processor through a cable (one cable connects the pod to the monitor regardless of how many sensors are coupled to the pod; Col. 3, lines 34-36).

As to claim 4, it differs from claim 3 in that claim 4 further teaches wherein the cable is connected to the data acquisition processor through a connector (data connectors allow physical connections to be established; Col. 5, lines 20-24).

As to claim 5, Maschke teaches wherein said portable monitoring unit is removable from said docking station in said second mode without disconnection of a connector (the sensors are connected to the portable monitor through cables, when the portable monitor is removed from the docking station the cables that's connected to the sensor remain attached to the portable monitor because if the connectors and cables are detached from the portable monitoring unit then all the patient's data would be lost; Col. 2, lines 23-28).

As to claim 6, Maschke teaches wherein said portable monitoring unit is removable from said docking station in said second mode without disconnection of a cable (the sensors are connected to the portable monitor through cables, when the portable monitor is removed from the docking station the cables that's connected to the sensor remain attached to the portable monitor because if the connectors and cables are detached from the portable monitoring unit then all the patient's data would be lost; Col. 2, lines 23-28).

As to claim 7, Maschke teaches wherein said portable monitoring unit in said third mode supports wear by a patient to support monitoring of patient parameters during patient movement (Col. 4, lines 59-61) and portable use by a healthcare worker to check parameters of multiple patients at different locations (displaying the patient data on a monitor; Col. 2, line 43).

As to claim 8, Maschke teaches wherein said first and third modes operate concurrently to communicate said processed patient parameter data to said image reproduction device for display and to said network access point coupled to said communication network (remote display device may be a fully functioning monitor and the docking station can communicate with several local area network; Col. 5, lines 14-17).

As to claim 10, Maschke teaches wherein said communication interface communicates said processed patient parameter data to a processor for conditioning said processed patient parameter data for display on a mobile tablet style reproduction device (docking station provides mechanical support for mounting the portable monitor as well as electrical couplings to a remote display, large display and television display; Col. 5, lines 9-13).

As to claim 11, Maschke teaches wherein said communication interface communicates said processed patient parameter data in said fourth mode by wireless communication (communicating the acquired data signal to monitor using a wireless communication link; Col. 3, lines 42-44).

As to claim 12, Maschke teaches wherein said processed patient parameter data comprises physiological data including an invasive or non-invasive blood pressure data (NIBP is displayed on the portable monitor; Col. 4, lines 4-7).

As to claim 13, Maschke teaches wherein said first, second and third modes support patient monitoring in a plurality of clinical situations including an intensive care unit (Col. 8, lines 30-31) and a pre-operative, intra-operative and post operative environment (Col. 8, lines 30-31).

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As to claim 14, Maschke teaches an interface port for receiving a compact flash device including memory (the use of a memory card to transfer data; Col. 5, lines 53-56).

As to claim 18, Maschke teaches wherein said portable monitoring unit is assigned to a single particular patient for the duration of the length of stay of said patient in a hospital in multiple hospital care areas (monitoring devices which attach to the patient's body are transported with the patient along with the portable monitor; Col. 4, lines 59-61).

As to claim 20, Maschke teaches wherein said portable monitoring unit is assignable on-demand to a specific patient to enable a spot-check of vital signs of said patient (the portable monitor displays the physiological data and has the ability for detachably mounting more data acquisition cartridges thus allowing the user to check for patient's vital signs such as blood pressure; Col. 4, lines 4-8).

As to claim 23, Maschke teaches wherein the cable is connected to the data acquisition processor through a connector (each pod is connected to the monitor by at most one cable and the sensors are connected to the patient to the pod; Col. 3, lines 33-37); and said communication interface for communicating said processed patient parameter data to: said image reproduction device for display in a first mode (the portable monitor displays the physiological data; Col. 4, line 4); a docking station when

said portable monitoring unit is docked in said docking station in a second mode (docking station is where the portable monitor may be attached; Col. 14, lines 37-38); and a network access point coupled to a communication network via wireless communication in a third mode (communicating the acquired data signals to monitor using a wireless communication link; Col. 3, lines 41-43); without requiring physical disconnection of the connector from the data acquisition processor (the sensors are connected to the portable monitor through cables, when the portable monitor is removed from the docking station the cables that's connected to the sensor remain attached to the portable monitor because if the connectors and cables are detached from the portable monitoring unit then all the patient's data would be lost; Col. 2, lines 23-28).

3. Claim 9 is rejected under 35 U.S.C. 103(a) as being unpatentable over Maschke.

As to claim 9, Maschke teaches a display unit that shows the patient's parameters (displaying patient data on a display device; Col. 2, lines 42-43). Maschke does not expressly disclose that the display unit powers down after a predetermined time interval to conserve power in response to a preprogrammed instruction. However, Examiner takes Official Notice that powering down a monitor to conserve energy is well known in the art. It would have been obvious at the time of the invention was made to one of ordinary skill in the art to make the display unit of Maschke to have the ability to

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power down after a duration of idle time since Examiner takes official notice that it is common for display units to have the sleep mode feature.

4. Claims 15-16 are rejected under 35 U.S.C. 103(a) as being unpatentable over Maschke.

As to claim 15, Maschke teaches the use of wireless communication link (Col.3 lines 41-43). Maschke does not expressly disclose that the wireless communication link is Bluetooth 802.15 compatible. However, Examiner takes Official Notice that Bluetooth is well known in the art. It would have been obvious at the time of the invention was made to one of ordinary skill in the art to make the wireless communication link Bluetooth compatible since Examiner takes official notice that Bluetooth is a common form of wireless connection.

As to claim 16, Maschke teaches the use of wireless communication link (Col.3 lines 41-43). Maschke does not expressly disclose that the wireless communication link is Bluetooth 802.15 standard compatible communication. However, Examiner takes Official Notice that Bluetooth well known in the art. It would have been obvious at the time of the invention was made to one of ordinary skill in the art to make the wireless communication link Bluetooth compatible since Examiner takes official notice that Bluetooth is a common form of wireless connection.

5. Claim 17 is rejected under 35 U.S.C. 103(a) as being unpatentable over Maschke.

As to claim 17, Maschke teaches the use of LANs (Col. 5, lines 16-17) and wireless communication links (Col. 3, lines 41-43). Maschke does not expressly disclose that automatically switching from LANs to wireless in order to find an optimum connection. However, Examiner takes Official Notice that detecting an optimum connection is well known in the art. It would have been obvious at the time of the invention was made to one of ordinary skill in the art to automatically switch between wired and wireless connections since Examiner takes official notice that detection of optimum connection is crucial for the performance of the system.

6. Claims 19, 22 and 26 are rejected under 35 U.S.C. 103(a) as being unpatentable over Maschke in view of Carter et al. (US 7,156,807 hereinafter "Carter").

As to claim 19, Maschke does not teach wherein said communication interface communicates with a wireless location detection system and supports patient location tracking. Carter teaches a wireless local area network system that comprises multiple access points that can include RF location-tracking modules, which may be used to track the locations of patients (Col. 2, lines 7-10). Thus Carter's patient location module reads on the claimed wireless location detection system for patient location tracking. Therefore, it would have been obvious for one ordinarily skilled in the art at the time the

invention was made to combine the transportable modular patient monitor with the wireless tracking abilities of Carter's location-tracking modules in order to track the locations of patients (Carter Col. 2, lines 7-10).

As to claim 22, it differs from claim 23 in that claim 22 teaches the plurality of patient attached sensors are connected to said data acquisition processor through a cable (each pod is connected to the monitor by at most one cable and the sensors are connected to the patient to the pod; Maschke Col. 3, lines 33-37).

As to claim 26, it is the same as claim 10, with the only difference it being in a different mode. Please see claim 10 for detail analysis.

Conclusion

7. The prior art made of record and not relied upon is considered pertinent to applicant's disclosure.
 - a. Groff et al. (US 6,102,856) teaches a wearable vital sign monitoring system.
 - b. Frid et al. (US 5,857,967) teaches a universally accessible healthcare device.
 - c. Lawson et al. (US 7,129,836) teaches a wireless subject monitoring system.

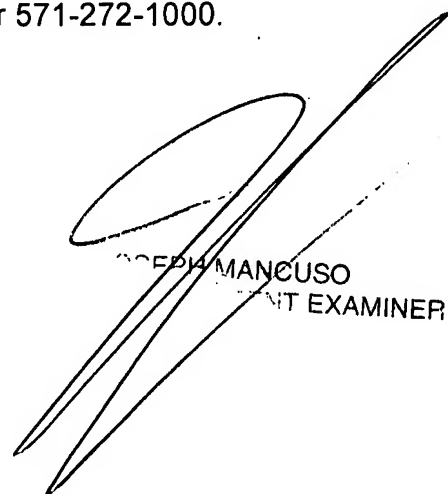
Contact Information

Any inquiry concerning this communication or earlier communications from the examiner should be directed to Claire Wang whose telephone number is 571-270-1051. The examiner can normally be reached on Mid-day flex.

If attempts to reach the examiner by telephone are unsuccessful, the examiner's supervisor, Joseph Mancuso can be reached on 571-272-7695. The fax phone number for the organization where this application or proceeding is assigned is 571-273-8300.

Information regarding the status of an application may be obtained from the Patent Application Information Retrieval (PAIR) system. Status information for published applications may be obtained from either Private PAIR or Public PAIR. Status information for unpublished applications is available through Private PAIR only. For more information about the PAIR system, see <http://pair-direct.uspto.gov>. Should you have questions on access to the Private PAIR system, contact the Electronic Business Center (EBC) at 866-217-9197 (toll-free). If you would like assistance from a USPTO Customer Service Representative or access to the automated information system, call 800-786-9199 (IN USA OR CANADA) or 571-272-1000.

Claire Wang
06/19/2007



JOSEPH MANCUSO
PATENT EXAMINER